



Embracing Our Heroes Scholarship

BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE FOLLOWING:

- Applicant must be admitted to Dixie State University and enrolled in nine or more credit hours
- Applicant must be a current member of the US Military, a veteran, or spouse of a veteran.
- Applicant must have a cumulative 3.0 GPA and demonstrate “financial need”
- Applicant must agree to participate in fundraising events when possible.
- The applicant agrees to allow use of their personal story for fundraising purposes. The signature on this application will act as a media release.
- Applicant must write a thank you letter to the Dixie State University Scholarship Department
- Scholarship awards are determined based on availability of funds.

PART I

Social Security Number: _____ Dixie State University Student ID # _____

Last Name: _____ First Name: _____ Middle Initial: _____

Date of Birth: _____ Email address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

Year in College: Freshman: ____ Sophomore: ____ Junior: ____ Senior: ____ Cumulative GPA: _____

Declared Major: _____ Bachelors Program: ____ Associate Degree: ____ Certificate: ____

PART II

Are you a Veteran? Yes ____ No ____ Are you the Spouse of a Veteran? Yes ____ No ____

With what unit did you (or your spouse) serve? _____

Are you (or your spouse) currently an active member of a National Guard unit? Yes ____ No ____

Name and number of unit: _____

Are you receiving tuition assistance through the National Guard? Yes ____ No ____

Are you receiving tuition assistance from any other federal or state agency? Yes ____ No ____

Are you a Purple Heart Recipient? Yes ____ No ____

Are you currently receiving any other scholarships from Dixie State College? Yes ____ No ____

Please attach a copy of your DD214 or other documentation of Veteran Status and submit with this application

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- I understand that by completing this application, I will be considered for this scholarship and that I am not guaranteed a scholarship.
- I have read the instructions and certify that the above information provided in this application is true and correct to the best of my knowledge.
- I also declare that if I attend Dixie State College, I will abide by the academic, scholastic and social standards of the college. A student found guilty of non-disclosure or misrepresentation in completing this form will be subject to disciplinary action, loss of scholarship and/or dismissal from college.
- I hereby authorize the scholarship office to release this application and any attached documentation, including GPA, to the scholarship committee, for consideration of this scholarship opportunity.

Signature _____

Date _____

Application Completion Checklist:

- Completed application, legible and written or typed in black ink.
- Copy of DD 214 or other documentation of veteran status
- Submitted on or before April 15th deadline (if mailed, must be postmarked by April 15th)

Submit your completed application to:

Attn: Joni Hale DSU Director of Scholarships

Email: scholarships@dixie.edu

Mailing address:

225 S University Ave

St George, UT 84770

FERPA (Family Educational Right and Privacy Act) requires that students give written permission to have other individuals such as parents, spouse, etc. access their Dixie State University information. Please complete an **Information Release Form** at: <http://dixie.edu/reg/forms/info-release.pdf> if you wish to allow information to be discussed by a third party. Please submit the completed form to the Registrar's Office.

